		Paper No.:
DATE	: le-15-05	
TO SPE OF	: ART UNIT VOLL	_
SUBJECT	: Request for Certificate of Cort	rection on Patent No.: 6800659
A response is	requested with respect to the	e accompanying request for a certificate of correction.
Please com	olete this form and return wi	ith file, within 7 days to:
		rrection Branch – South Tower – 9A22
lf response i MADRAS.	s for an IFW, return to em	ployee (named below) via PUBSCofC Team in
patent read a		orrecting Office and/or Applicant's errors, should the orrection (COCIN)? No new matter should be introduced, not hanged.
Chec	k clairs	Ennis Young
Thank You For Your Assistance		Certificates of Correction Branch
		Tal No. 702 205 0200
The regues	t for inquire the above ide	Tel. No. 703-305-8309
Note your decision	t for issuing the above-ide on the appropriate box.	entified correction(s) is hereby: All changes apply.
Note your decision	on the appropriate box.	entified correction(s) is hereby:
Note your decision	on the appropriate box. Approved	entified correction(s) is hereby: All changes apply.
Note your decision	on the appropriate box. Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	on the appropriate box. Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied OK as Shown	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
Note your decision	Approved Approved in Part Denied OK as Shown	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.